



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : CHEN  
Application No. : 09/813,314  
Filed : March 21, 2001  
Title : MUSCLE STRENGTHENING METHOD  
AND APPARATUS  
Group Art Unit : 3764  
Examiner : G. Richman  
Docket No. : BHT/3103-89

**OFFICE OF INITIAL PATENT EXAMINATION**

Honorable Commissioner for Patents  
Washington, D.C. 20231

**REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT**

Sir:

Please correct the Official Filing Receipt as noted in red on the attached photocopy, for the above-identified patent application.

Respectfully submitted,

Date: March 19, 2003

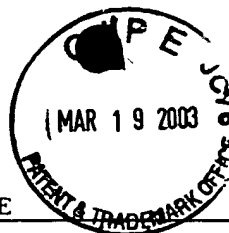
By:

Bruce H. Troxell  
Reg. No. 26,592

**TROXELL LAW OFFICE PLLC**  
5205 Leesburg Pike, Suite 1404  
Falls Church, Virginia 22041  
Telephone: (703) 575-2711  
Telefax: (703) 575-2707



## UNITED STATES PATENT AND TRADEMARK OFFICE



COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/813,314	03/21/2001	3764	355	BHT/3103/89	5	15	2

CONFIRMATION NO. 1561

## FILING RECEIPT



\*OC00000006025410\*

DOUGHERTY & TROXELL  
SUITE 1404  
5205 LEESBURG PIKE  
FALLS CHURCH, VA 22041

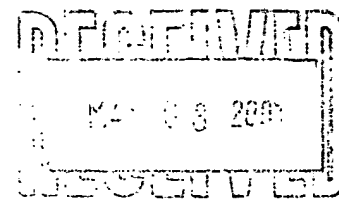
Date Mailed: 05/01/2001

S/C 12-21-01

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Chuan-Show Chen, Taoyuan Hsien, TAIWAN;  
Tzyy-Yuang Shiang, Taoyuan Hsien, TAIWAN;



Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 04/30/2001

Projected Publication Date: 09/26/2002

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

## Title

Muscle strengthening method and ~~apparatus~~  
apparatus

Preliminary Class

482

Data entry by : TADESSE, ETAGEAN

Team : OIPE

Date: 05/01/2001





UNITED STATES  
PATENT AND  
TRADEMARK OFFICE

3.200  
**FILE COPY**

Commissioner for Patents  
Washington, DC 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1561

<b>SERIAL NUMBER</b> 09/813,314	<b>FILING DATE</b> 03/21/2001 <b>RULE</b>	<b>CLASS</b> 482	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> BHT/3103/89	
<b>APPLICANTS</b> Chuan-Show Chen, Taoyuan Hsien, TAIWAN; Tzyy-Yuang Shiang, Taoyuan Hsien, TAIWAN;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 04/30/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> TAIWAN	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> DOUGHERTY & TROXELL 5205 Leesburg Pike Suite 1404 FALLS CHURCH, VA 22041					
<b>TITLE</b> Muscle strengthening method and apparatus					
<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		